SUPPLEMENT
TO THE
BRITISH MEDICAL JOURNAL.

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CONTENTS.

PAGE

British Medical Association.

CURRENT NOTES:
- INDIAN MEDICAL SERVICE ... 77
- MEMBERSHIP OF THE ASSOCIATION ... 77
- DR. MACDONALD'S VISIT TO SOUTH AFRICA ... 77
- DIRECT REPRESENTATIVES ON INSURANCE ACTS COMMITTEE ... 77
- HOSPITAL STAFFS AND TREATMENT OF STATE-SUPPORTED PATIENTS—Conference at Nottingham ... 78
- COLONIAL COMMISSIONS FOR VENEREAL DISEASE PROPAGANDA 78
- COLONIAL MEDICAL SERVICES ... 78
- MILEAGE FOR CORONERS' INQUESTS ... 78
- THE SALE OF ALCOHOL IN QUEENSLAND ... 78

MEETINGS OF BRANCHES AND DIVISIONS ... 79

ASSOCIATION NOTICES:
- MEETING OF COUNCIL ... 78
- BRANCH AND DIVISION MEETINGS TO BE HELD ... 78

INSURANCE CORRESPONDENCE:
- THE PAYMENT BY ATTENDANCE SYSTEM IN SALFORD ... 79
- INSURANCE MEDICAL RECORDS ... 79

NAVAL AND MILITARY APPOINTMENTS ... 79

ASSOCIATION INTELLIGENCE ... 80

APPOINTMENTS ... 80

POST-GRADUATE COURSES AND LECTURES ... 80

BIRTHS, MARRIAGES, AND DEATHS ... 80

British Medical Association.

CURRENT NOTES.

Indian Medical Service.

THE attention of readers of the JOURNAL is particularly called to the advertisement concerning the I.M.S. which appears in the advertisement columns of this number. The announcement that the new terms formulated by the Association had been granted was made to the Representative Body of the Association at the Annual Meeting at Cambridge in June last by Colonel R. H. Elliot, the indefatigable Chairman of the Naval and Military Committee, who has given so much time and thought to the betterment of his old Service. At that meeting Sir Havelock Charles, the Medical Adviser to the Secretary of State for India, was present, and stated that one reason for his presence at the meeting was his desire to thank the British Medical Association for what it had done for the Indian Medical Service. He also declared that the Service afforded a very fair career, and that the men wanted in India were men of sound constitution who loved their profession; with that combination it was scarcely possible for a man not to achieve success. Lieut.-Colonel R. A. Needham, Deputy Director-General I.M.S., who spoke as representing the I.M.S. officers on the active list, said that the very welcome announcement which had been made was a great encouragement to all officers in the Service. His own opinion was that the terms offered and the concessions granted would provide a very satisfactory living wage, and would enable any young medical man who desired a career in which he could indulge his active habits and pursuits, and find unlimited scope for professional work, to obtain it very satisfactorily in India.

The Representative Body, recognizing that this announcement was the crowning success of a struggle which had been waged since 1913, received the news with enthusiasm and passed the following resolution:

> That the terms offered by the Secretary of State for India in satisfaction of the demands made by the British Medical Association be accepted, and that the Association now use its best endeavours to help recruiting for the I.M.S.

The advertisement should be carefully studied by those who are on the threshold of their medical career and have leanings towards one of the services. We have it on the best authority that for the man who is keen and fond of his profession the I.M.S. offers opportunities that are second to none. It used to be a common complaint in the I.M.S. that the pre-war pay was good for the senior and junior officers, but that the men in the middle—the senior captains and majors—were in the unenviable position of being too poor to remain in the Service and at the same time too poor to get out of it. Examination of the present scale of pay will show that such objection can no longer be raised. The improvements in the opportunities for leave and study leave are a great advance; but it must not be forgotten that, however anxious the Secretary of State may be to give them, they depend on his ability to find the additional officers necessary. The Association promised the Secretary of State for India that as soon as the terms asked for were granted it would do its best to help in obtaining recruits for the Service, and this undertaking will be fulfilled. We now appeal, therefore, to all the officers in the I.M.S. who are members of the Association to honour the bargain made on their behalf and to encourage young men to join the Service.

Membership of the Association.

In the three months to September 4th, 1920, the membership of the British Medical Association has increased by 828. The members of the Association now number 23,103.

Dr. Macdonald's Visit to South Africa.

Dr. J. A. Macdonald sailed for South Africa on September 10th in the *Walmer Castle*. He is due to arrive at Durban early in the week beginning October 4th—the week fixed for the South African Medical Congress. The secretary of the South African Committee, which is representative of all the South African Branches (Dr. A. W. Reid), has promised to do all he can to facilitate Dr. Macdonald's desire to see as much of the members of the South African profession as possible and to visit all the South African Branches, and the secretaries of the Branches have been asked by the Head Office to do what they can to make his visit profitable to all concerned. The reports which have appeared in the South African medical journals show that Dr. Macdonald is assured of a warm welcome, and he on his part is anxious to discuss with members in South Africa the best ways of making still more effective the union between the Association at home and its Branches in South Africa. Dr. Macdonald hopes to visit the Branches in Eastern Africa, but until his arrival in South Africa he cannot be sure whether time will allow of this.

Direct Representatives on Insurance Acts Committee.

The secretaries of Local Medical and Panel Committees are reminded that nominations for direct representatives on the Insurance Acts Committee must be received by the Medical Secretary not later than the first post on Monday, October 11th. The necessary form (M.2) may be had on application to the Medical Secretary, British Medical Association, 429, Strand, W.C.2.

Hospital Staffs and Treatment of State-supported Patients.

The action of public authorities and other bodies in making payments to voluntary hospitals for the treatment of certain classes of the community, and that of the Government in paying for the treatment of discharged and disabled soldiers and sailors, has led the medical staffs of these hospitals to ask how far their willingness to give their services voluntarily to the necessitous poor can be expected to apply to these new and increasing classes. In June, 1920, a circular letter was sent out to secretaries of medical staffs of voluntary hospitals and secretaries of Branches and Divisions explaining the position and defining the attitude of the British Medical Association in the matter. It is now important that the Association should be in possession of a complete list of all the hospitals which have adopted and are carrying out the principle of payment, in some form or other, of their voluntary medical staffs for this kind of work. The following hospitals are reported as having adopted the system:

Gloucester Royal Infirmary.
Salop Royal Infirmary.
Cheltenham General Hospital.
North Lonsdale Hospital.
King's College Hospital.
Sunderland Royal Infirmary.
Victoria Hospital, Accrington.
Northgate Red Cross Hospital, Bury St. Edmunds.

The Medical Secretary would be very glad of information from other hospitals which will enable him to keep a complete record.

Conference at Nottingham.

A conference of members of medical staffs of voluntary hospitals in the area of the Midland Branch of the British Medical Association will be held at 64, St. James's Street, Nottingham, on Thursday next, September 23rd, at 4 p.m. The following resolution will be proposed:

> That this conference approves of the principles defined by the British Medical Association relative to the recognition by a monetary payment made to a medical staff fund for medical services rendered to State or municipal patients received for treatment at the voluntary hospitals.

In the event of this resolution being approved, the conference will be asked to consider by what means these principles can best be carried out. Invitations to attend have already been issued to the members of medical staffs of all the voluntary hospitals in the area, but any members of the medical profession residing in the area of the Branch who may be interested in this subject are cordially invited to attend.

Colonial Commissions for Venereal Disease Propaganda.

Sympathetic replies have already been received from the Ceylon, British Guiana, Malaya, and Malta Branches, and from members of the Association in British North Borneo and the Leeward Isles, to the letter sent in May last to Branches or members of the British Medical Association in the areas proposed to be visited by the Medical Commissions being sent overseas under the auspices of the National Council for Combating Venereal Diseases, 80, Avenue Chambers, Southampton Row, London, W.C.1 (see SUPPLEMENT, May 29th, 1920, p. 173). All replies received from Branches or from members of the Association in the areas to be visited by the Commissions are being handed by the Association to the National Council, and the latter is communicating further with the writers as to the arrangements for the visits, so far as these have been made. It is satisfactory to find that the action taken by the Association has materially furthered this important work being undertaken by the National Council, and that body has expressed to the Association its thanks for the help thus given.

Colonial Medical Services.

The report of the Colonial Medical Services Committee, appointed by the Secretary of State last autumn, has just been issued, and an account of the Committee's findings and recommendations appears in the JOURNAL at p. 448. The Dominions Committee of the Association is considering the report at its meeting this week.

Mileage for Coroners' Inquests.

A member of the Association who practises in a sparsely populated area has recently raised the question of travelling expenses in connexion with coroners' inquests. He asked if they could be claimed legally. He stated that in his experience it was quite possible in some cases for the cost of travelling to absorb the whole of the fee paid. There does not appear to be any legal claim for travelling expenses in connexion with these services. The member, however, has continued to urge his claim on the Council of the County of Montgomery, in which he resides, and the County Council has recently agreed that the travelling expenses, on the approved county scale, shall be allowed to medical witnesses at coroners' inquests. Rural practitioners should notice this, and take steps to get their local authorities to follow this example. Meanwhile the Association hopes that the representations repeatedly made, and recently renewed, to the Home Secretary and the Minister of Health for the complete reform of Coroners' Law, in which this question was not overlooked, may meet with success.

The Sale of Alcohol in Queensland.

The Liquor Act of 1920 provides for a referendum to be taken every three years; in the first, which is to be conducted in October, the vote is to be taken on three alternative issues: (1) State management of the manufacture, importation, and sale of alcoholic liquors; (2) prohibition of manufacture, importation, and retail of fermented and spirituous liquors—to take effect in 1925; (3) the continuance of the present system. A specially convened meeting of the Queensland Branch of the British Medical Association was held in Brisbane on June 18th, 1920, with Sir David Hardie, the president, in the chair, in order to consider the attitude of the Queensland Branch towards this referendum. In the discussion which took place the speakers, while admitting that alcohol had its uses in stimulating appetite and causing sleep, declared that the price which the community had to pay for these benefits was too high. The opinion was generally expressed that little benefit could be hoped to accrue from State control, and a motion was carried endorsing prohibition of the manufacture, importation, and sale of alcohol. It was decided to take a referendum of all the members of the Queensland Branch and to announce this decision in the public press.

Association Notices.

MEETING OF COUNCIL.

THE next Meeting of Council will be held on Wednesday, October 6th, in the Council Room, 429, Strand, London, W.C. 2., at 10 a.m.

BRANCH AND DIVISION MEETINGS TO BE HELD.

BORDER COUNTIES BRANCH.—A clinical meeting of the Branch will be held in the Dumfries and Galloway Royal Infirmary at 2.45 p.m. on Friday, September 24th. The Council will meet at 2 p.m. Members desirous of showing cases or specimens are asked to communicate with the honorary secretary, Dr. Norman Maclaren, 23, Portland Square, Carlisle.

EDINBURGH BRANCH: SOUTH-EASTERN COUNTIES DIVISION.—A meeting of the Division will be held at the Railway Hotel, Newtown St. Boswells, at 3 p.m. on Wednesday, September 22nd. The business will include consideration of the report of the Representative to Representative Meeting; nomination of candidates for election to the Scottish Committee, British Medical Association, and a paper by Dr. S. Davidson (Kelso) on acute appendicitis.

ESSEX BRANCH.—The annual meeting of the Essex Branch will be held at Southend-on-Sea on Thursday, September 23rd. Members wishing to read papers or show cases should communicate with Dr. J. F. Walker, Rocklands, Clifton Terrace, Southend-on-Sea.

WORCESTERSHIRE AND HEREFORDSHIRE BRANCH.—The autumn meeting of this Branch will be held at the hospital at Malvern on Thursday, September 30th, at 3 p.m. After the ordinary business of the Branch, Dr. H. Russell Andrews, obstetric physician to the London Hospital, will read a paper on the treatment of uterine fibroids.

YORKSHIRE BRANCH: SHEFFIELD DIVISION.—A British Medical Association lecture will be given to this Division by Mr. W. Sampson Handley, M.S., on Friday, October 29th, at the Church House, St. James Street, Sheffield, at 8.45 p.m., on "The lines of advance in the surgery of the breast."

Meetings of Branches and Divisions.

MIDLAND BRANCH: LEICESTER AND RUTLAND DIVISION.

THE annual country meeting of the Division was held at Melton Mowbray on September 10th. Members' wives were invited to attend an organ recital given in the Parish Church by Dr. Malcolm Sargent, and to tea, tennis, and croquet at the residence of the chairman, Dr. R. H. Fagge, after the Divisional meeting.

The CHAIRMAN having welcomed the Division to Melton, Dr. WALLACE HENRY gave an account of the proceedings of the Representative Meeting. A resolution approving of the suggested alteration in the boundary of the Branch was approved subject to the assent of the Lincoln Division. Several clinical cases of an interesting character were shown, and a discussion followed.

CORRESPONDENCE.

NATIONAL INSURANCE.

The Payment by Attendance System in Salford.

SIR,—After a careful perusal of the article by Dr. J. H. Taylor on "National Insurance: The Payment by Attendance System in Salford," I beg to offer the following objections, briefly summarized, to the opinion therein expressed—that the Salford system possesses "superiority over the ordinary capitation system, whether it be from the point of view of the doctors or the insured persons."

I contend that the claim for the Salford system that it works the National Insurance Act upon private practice lines by "payment per attendance" is not sufficiently established by the facts given. At best it is only a very imperfect adaptation, and a mere approximation to the private practice system. The payment for the medical services given removes it entirely from the plane of ordinary medical practice, the attendance fee being grossly inadequate.

The method of estimating the panel practitioner's income is tedious, irksome, and expensive; and by reason of the Panel Committee's intromissions liable to cause irritation and dissatisfaction, although the loyalty of the practitioners to the system may prevent this being expressed.

The doctor's remuneration must necessarily vary with the prevalence of disease in the district, so that their cheques will vary in amount, perhaps considerably, from quarter to quarter. (Contrast with the regular steady payments under the capitation system.) The temptation to give excessive attendance (admitted) apparently operates so as to depreciate the attendance fee, which at 1s. 6d. is considerably less than that obtained under the capitation system.

The clerical work of the panel practitioner (in keeping attendance sheets, etc.)—the bugbear of the Insurance Act—is greatly increased under the Salford system.

The principle of "free choice of doctor" works out differently in the two styles of insurance practice, so that they cannot fairly be compared from that point of view. The frequency rate of "change of doctor" is much higher under the Salford system—4 per cent. as contrasted with 1 per cent. or 2 per cent. in the capitation system. This latter rate corresponds closely with that found in other forms of capitation practice (colliery) where absolute "free choice of doctor" obtains.

The greater facility to exercise "free choice of doctor" (expressed in frequent "change of doctor") is inseparable from the private practice or "payment per attendance" system, in which the economic relation between doctor and patient is mainly one of barter, and where a quick and easy exchange is an advantage. Under the capitation system there is superadded a definite contractual relationship (the yearly agreement) which militates against frequent "change of doctor." This tends to stabilize the capitation practice, as compared with one run on private practice lines, and enhances its transfer value.

The standard of courtesy, medical relationships, etc., is probably as high in the one system as the other. Practitioners working under the capitation system appear on the whole as well satisfied with their form of service as those in Salford. Hence the general preference among panel practitioners to continue under that system rather than adopt the other, despite all its superiority.—I am, etc.,

Stanley, Durham, Sept. 8th. J. CHARLES.

SIR,—The article in the SUPPLEMENT of August 28th by Dr. J. H. Taylor under the above heading should be carefully read by all interested in the subject. It is the nearest approach to what the whole profession demanded in 1910 and 1911, and with certain and definite alterations it might be made general, and save the face of the profession after the awful *débâcle* in the dark years before the great war. Its best principle is the *definite free choice of doctor* which it gives, and which is not to be had under the present general system.

It is certainly impossible to visit for 1s. 6d. at the present time; this would have to be raised and the wage limit decreased. I have never been able to understand why medical men are always willing to serve under committees who have a majority of lay people; it is quite undignified and very stupid.

The position in London of the medical benefit under the Act cannot be called satisfactory. The number of panel doctors is stated to be about 1,460, but this number is, I believe, over the mark, as on the borders of the boroughs the medical men appear very often in both. I put the number down as 1,300. I have this week counted the names of all doctors in London in the *Medical Directory* for 1919. Excluding the Harley Street and neighbourhood group, men holding official appointments, and retired practitioners, but including names in which the address is uncommunicated, I find the number is 5,797. Omitting the hundreds, the sum works out as follows: Total of non-panel medical men, who will not accept the present conditions of the Insurance Act, is 3,700 (5,000 less 1,300). It is remarked that 80 per cent. of the profession are on the panels; it looks as if in London not 30 per cent. are on. With the above evidence before us a new insurance scheme is necessary if the poor are to have the benefit of the best medical advice.

Thanks to the Insurance Act, there is no unity in the profession; there are three groups, all pulling in different directions, without any present hope of coming together again. It is urgently necessary, therefore, that a Royal Commission should sit without delay and decide what new schemes should be put through. The interim report on the future provision of medical and allied services reads to me like a feverish midsummer's night dream. I have no confidence in the present Minister of Health or his Consultative Council; it seems to me they wish to drag the profession further into the mire of ill-considered medical legislation. The apathy of the profession at the present time is truly awful; are they never going to wake up, not only for the benefit of the dignity of medicine and of the sick poor, but for their own advantage?—I am, etc.,

London, S.W., Sept. 5th. E. H. WORTH, M.R.C.S.

Insurance Medical Records.

SIR,—With reference to the new form of medical records which insurance practitioners will be supposed to keep of their insured patients in the near future, it would be interesting to know what is going to happen to those insured patients who insist upon being medically attended by a private practitioner.—I am, etc.,

Hampstead, N.W., Sept. 11th. O. L. THEOBALDS.

Naval and Military Appointments.

ROYAL NAVAL MEDICAL SERVICE.

THE following appointments are announced by the Admiralty: Surgeon Commanders R. L. Jones to the *Chatham*, P. H. Boyden to the *President*, additional for Porton Experimental Station, J. R. Muir to R.N. Hospital, Haslar, R. H. McGiffin to the *Raleigh*. Surgeon Lieutenant Commander W. H. Murray to R.N. Hospital, Gibraltar. Surgeon Lieutenants H. B. Padwick, D.S.O., to the *Dwarf* (to take passage in the *Monarch*), H. L. Pridham to R.M. Infirmary, Deal, W. J. Colborne to the 3rd R.M. Battalion, Eastern Mediterranean.

ARMY MEDICAL SERVICE.

ROYAL ARMY MEDICAL CORPS.

Lieut.-Colonel R. J. W. Mawhinny, C.B., relinquishes the temporary rank of Colonel.

Lieut.-Colonel H. S. Roch, C.M.G., D.S.O., relinquishes the acting rank of Colonel.

Major W. Davis relinquishes the acting rank of Lieutenant-Colonel.

Major C. R. M. Morris, D.S.O., to be Acting Lieutenant-Colonel.

Temporary Major N. G. Cooper to relinquish the acting rank of Lieutenant Colonel.

Temporary Major G. S. Simpson (Captain R.A.M.C.T.F.) relinquishes his temporary commission on reposting.

Temporary Major A. L. B. Green, D.S.O. (Major, 1st Herefords T.F.), relinquishes his temporary commission (March 20th, 1919—substituted for notification in the *London Gazette*, July 26th, 1920).

Captains W. Foot, M.C., and F. C. Tibbs relinquish the acting rank of Major.

Temporary Captains relinquish the acting rank of Major: J. L. Wilson, D. C. McCabe-Dallas.

Captain H. J. Bensted, M.C., to be temporary Major whilst specially employed.

Captain J. M. Macfie, M.C., to be acting Major.

Captain W. L. E. Fretz to be acting Major from September 1st, 1918, to June 13th, 1920, inclusive.

The undermentioned Captains are restored to the establishment: W. C. Hartgill, M.C., C. D. M. Buckley, M.C., J. D. L. Thompson, M.C.

Major W. Bruce, O.B.E., from New Zealand Medical Corps, to be Captain, November 18th, 1918, but not to reckon for pay or allowances prior to August 19th, 1920, with precedence next below D. McVicker.

Captain H. L. C. Noel resigns his commission.

Temporary Captain J. McP. MacKinnon to be Captain, April 3rd, 1918, but not to reckon for pay or allowances prior to July 1st, 1919, with precedence next below J. McFadden (substituted for notification in the *London Gazette*, August 9th and September 3rd, 1919).

Captain F. Holmes, from S.R., to be Lieutenant and to be temporary Captain, October 10th, 1918, but not to reckon for pay or allowances prior to August 1st, 1920, with precedence next below J. E. Rea.

To be temporary Captains: D. E. Hearn, late Captain R.A.M.C. (S.R.), June 3rd, 1920, with seniority from November 9th, 1918 (substituted for notification in the *London Gazette*, August 13th, 1920); J. D. Judson, late temporary Captain, August 9th, 1920, with seniority from June 2nd, 1917; H. H. McClelland, late temporary Captain, August 13th, 1920, with seniority from January 30th, 1919.

The notifications in the *London Gazette* of August 13th, 1920, regarding the undermentioned are cancelled: D. B. Robertson, H. A. Hill, W. H. Simmons.

Captain J. McP. MacKinnon is seconded for service with the Egyptian army.

The following Lieutenants (temporary Captains) to be Captains: G. E. L. Simons, E. Parker, L. G. Blackmore, V. J. Bonavia, D. J. Batterham.

Captain J. C. Preston, from S.R., to be Captain, February 15th, 1920, but not to reckon for pay or allowances prior to August 1st, 1920, with precedence next below R. H. C. Pryn.

The following officers relinquish their commissions:—Temporary Lieut.-Colonel T. S. Good, O.B.E., on ceasing to be employed at the Ashurst War Hospital, and retains the rank of Lieutenant-Colonel. Temporary Captains, and retain the rank of Captain: E. C. Arnold, H. H. Perry, H. C. Sutton, W. L. G. Anderson, J. M. MacPhail, P. Johnson, W. H. Harvey, W. E. Fraser, A. S. Cook, J. M. Wallace, H. Harrison, A. R. Perrie. Temporary Captain C. W. Joynt.

ROYAL AIR FORCE.

MEDICAL BRANCH.

Flying Officer G. H. H. Maxwell to be Flight Lieutenant.

The following are transferred to the Unemployed List: Captain M. C. Breese (June 12th—substituted for notification in the *London Gazette* of July 2nd), Captains D. Cromrie, R. D. Jones, E. H. L. Le Clezio, Captain (acting Lieutenant-Colonel) A. P. Bowdler, O.B.E., Lieutenant R. I. Rhys.

SPECIAL RESERVE OF OFFICERS.

ROYAL ARMY MEDICAL CORPS.

Captain R. Taylor, M.C., relinquishes his commission and is granted the rank of Major.

The following Captains resign their commissions and retain the rank of Captain: C. A. Bignold, G. F. Randall.

Captain A. Bulleid relinquishes the acting rank of Major.

Captain G. I. Evans relinquishes his commission, and retains the rank of Captain.

Captain R. E. Grandy relinquishes his commission.

The notifications in the *London Gazette* of May 25th, 1920, regarding the undermentioned Captains are cancelled: D. B. Robertson, W. H. Simmons, H. A. Hill, T. A. Butcher, O.B.E.

Captain (acting Major) C. A. McGuire relinquishes the pay and allowances of his acting rank (July 11th, 1919—substituted for notification in the *London Gazette*, June 4th, 1920).

The undermentioned Captains relinquish their commissions on account of ill health contracted on active service: C. A. McGuire, and is granted the rank of Major; G. E. Shand, and retains the rank of Captain (substituted for notifications regarding these officers in the *London Gazette* of April 23rd and January 23rd, 1920, respectively).

TERRITORIAL FORCE.

ROYAL ARMY MEDICAL CORPS.

Lieut.-Colonel A. T. Falwasser, D.S.O., resigns his commission and retains the rank of Lieutenant-Colonel.

Major H. G. Smeeth (late Major R.A.M.C., S.R.) to be Lieutenant-Colonel and to command 1st East Lancs Field Ambulance (February 16th, 1920).

Major (acting Lieut.-Colonel) W. F. Roe, D.S.O., T.D., relinquishes the rank of Lieut.-Colonel on ceasing to be specially employed.

Captains (acting Majors) W. A. Brechin, M.C., and L. Beesley relinquish the acting rank of Major on ceasing to be specially employed.

Captain C. H. Bullen to be Major.

Captain O. Teichman, D.S.O., M.C., to be D.A.D.M.S. 2nd London Division.

Captain A. G. Wilson, from 3rd Northern General Hospital, to be Captain, with precedence as from January 2nd, 1909 (substituted for notification in the *London Gazette*, July 20th, 1920).

Captain R. B. Lilly (late temporary Captain R.A.M.C.) to be Captain, with precedence as from February 6th, 1918.

Captain G. Eager (late temporary Captain R.A.M.C.) to be Lieutenant and to relinquish the rank of Captain.

Captain J. G. Morrin (late temporary Captain R.A.M.C.) to be Captain, with precedence as from April 25th, 1919.

Captain C. H. Vernon (late R.A.F. Medical Service) to be Captain.

2nd Eastern General Hospital.—Captain H. H. E. Scatliff resigns his commission and retains the rank of Captain, with permission to wear the prescribed uniform.

1st London General Hospital.—Major L. B. Rawling is restored to the establishment.

3rd Northern General Hospital.—Captain G. S. Simpson is restored to the establishment on ceasing to hold a temporary commission in the R.A.M.C.

3rd Southern General Hospital.—Captain F. Clarke is restored to the establishment.

Supernumerary for Service with the Officers' Training Corps, Belfast University Medical Unit Contingent, Senior Division.—Captain G. G. Lyttle relinquishes his commission.

The following officers resign their commissions: Captain T. H. Peyton, D.S.O., and is granted the rank of Lieutenant-Colonel. Captains and are granted the rank of Major: D. M. Spring, T. W. Hancock, O.B.E., A. Anderson, C. S. P. Black, M.C., W. A. Brechin, M.C. Captains and retain the rank of Captain: E. S. Simpson, M.C., J. Fenton, H. W. Kerrigan, W. W. Adamson, L. A. Williams, C. W. Greene, F. C. Pridham, G. C. Soutter.

POST-GRADUATE COURSES AND LECTURES.

MANCHESTER FRENCH HOSPITAL, 24, Acomb Street (behind Whitworth Park).—Post-Graduate Lecture: Thurs., 4.15 p.m., "Tubal Abortion."

WEST LONDON POST-GRADUATE COLLEGE, Hammersmith, W.—Daily, 10 a.m., Ward Visits; 2 p.m., In- and Out-patient Clinics and Operations. Mon., 2 p.m., Mr. Bishop Harman: Eyes; Mr. Macdonald: Out-patients. Tues., 10 a.m., Dr. McDougal: Electrical; 2 p.m., Mr. Tyrrell Gray: Out-patients. Wed., 2 p.m., Dr. Owen: Out-patients; Mr. Addison: Operations. Thurs., 2 p.m., Dr. Grainger Stewart: Out-patients; Mr. MacDonald: Out-patients. Fri., 2 p.m., Mr. Banks Davis: Throat, Nose, and Ear; Dr. Pernet: Skin. Sat. 2 p.m., Dr. Owen: Out-patients; Mr. Sinclair: Out-patients.

British Medical Association.

OFFICES AND LIBRARY, 429, STRAND, LONDON, W.C.2.

Reference and Lending Library.

THE READING ROOM, in which books of reference, periodicals, and standard works can be consulted, is open to members from 10 a.m. to 6.30 p.m., Saturdays 10 to 2.

LENDING LIBRARY: Members are entitled to borrow books, including current medical works; they will be forwarded, if desired, on application to the Librarian, accompanied by 6d. for each volume for postage and packing.

Departments.

SUBSCRIPTIONS AND ADVERTISEMENTS (Financial Secretary and Business Manager. Telegrams: Articulate, Westrand, London. Tel.: Gerrard 2630).

MEDICAL SECRETARY (Telegrams: Medisecra, Westrand, London. Tel.: Gerrard 2634).

EDITOR, *British Medical Journal* (Telegrams: Aitiology, Westrand, London. Tel.: Gerrard 2631).

SCOTTISH MEDICAL SECRETARY: 6, Rutland Square, Edinburgh. (Telegrams: Associate, Edinburgh. Tel.: 4361 Central.)

IRISH MEDICAL SECRETARY: 16, South Frederick Street, Dublin. (Telegrams: Bacillus, Dublin. Tel.: 4737 Dublin.)

Diary of the Association.

SEPTEMBER.

17 Fri. London: Organization Committee, 11.30 a.m.
21 Tues. London: Medico-Political Committee, 2.30 p.m.
22 Wed. London: Finance Committee, 2.30 p.m.
Edinburgh Branch: South-Eastern Counties Division, Railway Hotel, Newtown St. Boswells, 3 p.m.
23 Thurs. London: Insurance Acts Committee, 2.30 p.m.
Essex Branch: Annual meeting at Southend-on-Sea.
Nottingham: Conference of Medical Staffs of Voluntary Hospitals called by Midland Branch, 4 p.m.
24 Fri. Border Counties Branch: Clinical meeting, Dumfries and Galloway Royal Infirmary, 2.45 p.m. Council meeting, 2 p.m.
28 Tues. London: Scrutiny Subcommittee, 11.15 a.m.
30 Thurs. Worcestershire and Herefordshire Branch: Autumn meeting, at the hospital, Malvern, 3 p.m.

OCTOBER.

6 Wed. London: **Council**, 10 a.m.
21 Thurs. London: Conference of Representatives of Local Medical and Panel Committees.
29 Fri. Sheffield Division: A British Medical Association lecture by Mr. W. Sampson Handley, M.S., at the Church House, St. James Street, Sheffield, on "The Lines of Advance in the Surgery of the Breast," 8.45 p.m.

APPOINTMENTS.

ALDOUS, G. F., F.R.C.S.Ed., Consulting Surgeon to the Totnes Hospital, South Devon.

CHRISTOPHERSON, W. B., M.R.C.S., L.R.C.P., Tuberculosis Officer to the County of Norfolk and Medical Officer to the Stanninghall Farm Colony.

DAWSON, W. S., M.A., M.B., M.R.C.P., Assistant Medical Officer, London County Asylum, Hanwell.

MULLALLY, G. T., M.C., M.S., F.R.C.S., Assistant Surgeon, Westminster Hospital.

TANNER, W. E., M.S., F.R.C.S., Assistant Surgeon, the Prince of Wales's General Hospital, Tottenham.

EDINBURGH ROYAL INFIRMARY.—Resident House-Physician: Ronald McD. Cairns, M.B., Ch.B. Resident House-Surgeons: A. W. P. Haine, M.B., Ch.B., W. D. Brunton, M.B., Ch.B., A. A. Denham, M.B., Ch.B., G. M. S. Lindsay, L.R.C.P. and S.Ed. Non-resident House-Surgeons: J. M. Norman, M.B., Ch.B.; Miss P. R. Whitaker.

BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting announcements of Births, Marriages, and Deaths is **7s. 6d.**, *which sum should be forwarded with the notice not later than the first post on Tuesday morning in order to ensure insertion in the current issue.*

MARRIAGE.

THOMAS—JONES.—On Wednesday, September 8th, at Moriah Chapel, Carnarvon, by the Rev. H. C. Lewis, Llandudno, and the Rev. W. H. Lewis, Beaumaris, Dr. E. R. Thomas, of Beaumaris, to Miss Phoebe Jones, formerly Matron of the Carnarvonshire and Anglesey Infirmary.

DEATH.

NOTT.—On August 26th, suddenly, from heart failure while on a visit to the Engadine, Arthur Holbrook Nott, Lieutenant-Colonel, Indian Medical Service (retired), of 22, Drayton Court, London, S.W., second son of the late William Nott, of Devizes, aged 58.

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